Dental therapists would be plus for NM

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By Dr. Alfredo Vigil / Former N.M. Cabinet Secretary, Health & Human Services

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Every day, I see patients with serious dental problems. They come to me with abscessed teeth, fevers and severe pain. Some have malnutrition because they are unable to eat properly. In others, you can see that their front teeth are literally rotting in their mouths.

I'm not a dentist. I'm a medical doctor.

The patients I'm seeing can't get dental care. They don't have dental insurance, and they can't afford to pay for dental care on their own.

Three community health centers in the area offer basic dental services on a sliding income scale, but they can't see everyone who needs care. Hardworking private dentists are all at maximum capacity.

When patients open their mouths for me and ask if there's anything I can do, it's because they have nowhere else to turn. But I can't help them.

For patients who have an abscessed tooth, I can prescribe antibiotics and painkillers, neither of which will solve the underlying problem. For that, they need to see a dentist.

This has been the reality of my practice for years – and believe me, I'm not the only doctor in New Mexico who's seeing this. Ask any general practice provider or emergency physician, especially in a rural community, and you'll hear the same story.

It doesn't have to be this way. For several years now, a group called Health Action New Mexico has proposed expanding the dental care team with mid-level practitioners called dental therapists, who would bring high-quality, affordable dental care to more New Mexicans.

It's a good idea. The only thing standing in its way is the New Mexico Dental Association.

Let me be clear. New Mexico's dentists are working as hard as they can to serve their communities. But we simply don't have enough of them. Hundreds more are needed to meet the demand.

The dental association has all kinds of arguments against dental therapists. If you listen closely, you'll find that these arguments resemble the ones organized medicine put forth years ago to block the introduction of nurse practitioners, physician assistants, and other kinds of physician extenders who today are regarded as indispensable.

Dental therapists would do the same for dental care. They don't do everything that dentists do. Instead, they focus on the basics, including preventive measures, fillings, and uncomplicated extractions.

These are services that don't have to be performed by dentists. By adding dental therapists to their teams, dentists could practice at the top of their training and focus on providing those services that only a dentist can perform.

Dental therapists generally practice off-site from their supervising dentists, bringing services to patients where they are – in schools, nursing homes, mobile clinics, and other settings where dentists don't normally work.

And because dental therapists are less expensive to employ than dentists, community health centers and other safety net providers could hire dental therapists to help them serve more low-income patients.

The dental therapist approach is backed by years of experience and numerous studies affirming both the high quality of care that dental therapists provide and their success at expanding access. In fact, not a single study has shown otherwise.

In Alaska, dental therapists have made care available to more than 40,000 people in remote communities since they started practicing 10 years ago. Minnesota established its dental therapy program in 2009, and already it is expanding dental care access.

Maine passed legislation authorizing dental therapists in 2014, and a dozen other states are actively exploring dental therapists as a way to address dental care access.

I firmly believe dental therapists are the future of dental care. The New Mexico Dental Association refuses to accept this, yet it has failed to propose any realistic alternatives.

It is easy for people who don't see the pain and suffering I witness every day to deny there is a problem and reject solutions. Personally, I am tired of sending patients home without help.

All New Mexicans should be able to get dental care when they need it, where they live. I call on my colleagues in the medical profession and in the policy sector to show leadership on this issue and help bring dental therapists to our state.